

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 78 / 82

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
 FRIENDS OF CONGRESSMAN GEORGE MILLER

A. Full Name (Last, First, Middle Initial) Office Max Mailing Address 1795 Willow Pass Rd	Transaction ID: 17-5850-P Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 0 / 2 0 1 0</div> </div>
City Concord State CA Zip Code 94520 Purpose of Disbursement Office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>102.07</div> [MEMO ITEM] Credit card payee, see Schedule D Cardmember Service (Borel VISA)
B. Full Name (Last, First, Middle Initial) Office Max Mailing Address 1795 Willow Pass Rd City Concord State CA Zip Code 94520 Purpose of Disbursement Event office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-5846-P Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 6 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>17.77</div> [MEMO ITEM] Credit card payee, see Schedule D Cardmember Service (Borel VISA)
C. Full Name (Last, First, Middle Initial) UNITED STATES POSTMASTER Mailing Address 1675 Seventh St Room 154W City Oakland State CA Zip Code 94615-9561 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-5847-P Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 9 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>1.05</div> [MEMO ITEM] Credit card payee, see Schedule D Cardmember Service (Borel VISA)
SUBTOTAL of Disbursements This Page (optional) ▶	<div>0.00</div>
TOTAL This Period (last page this line number only) ▶	